

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Title::	CONNECTIVE TISSUE SUBSTITUTES, METHOD OF PREPARATION AND USES THEREOF
Attorney Docket Number::	238813US-6 DIV
Total Drawing Sheets::	17
Small Entity?::	NO

INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Canada
Status::	FULL CAPACITY
Given Name::	Francine
Family Name::	GOULET
City of Residence::	Sainte-Foy
Country of Residence::	Canada
Street of Mailing Address::	853, De Monts
City of Mailing Address::	Sainte-Foy
State or Province of Mailing Address::	Quebec
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	G1X 2R6

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Canada
Status::	FULL CAPACITY
Given Name::	Denis
Family Name::	RANCOURT
City of Residence::	Levis
Country of Residence::	Canada
Street of Mailing Address::	1, Boisvert
City of Mailing Address::	Levis
State or Province of Mailing Address::	Quebec
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	G5W 1V2

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Rejean
Family Name:: CLOUTIER
City of Residence:: Sillery
Country of Residence:: Canada
Street of Mailing Address:: 1295, ave. De Puiseaux
City of Mailing Address:: Sillery
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G1T 2C7

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Julie
Family Name:: TREMBLAY
City of Residence:: Beauport
Country of Residence:: Canada
Street of Mailing Address:: 475, rue Tronguet
City of Mailing Address:: Beauport
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G1C 7E3

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Francois
Middle Name:: A.
Family Name:: AUGER
City of Residence:: Sillery
Country of Residence:: Canada
Street of Mailing Address:: 1336, rue Duquet
City of Mailing Address:: Sillery
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G1S 1A9

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: DECEASED INVENTOR
Given Name:: Albert
Family Name:: NORMAND
City of Residence:: Sainte-Foy
Country of Residence:: Canada
Street of Mailing Address:: 3621, Esperanto
City of Mailing Address:: Sainte-Foy
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G1W 4D1

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Lucie
Family Name:: GERMAIN
City of Residence:: St-Augustin
Country of Residence:: Canada
Street of Mailing Address:: 232, du Trefle
City of Mailing Address:: St-Augustin
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G3A 1H8

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Jean
Family Name:: LAMONTAGNE
City of Residence:: St-Augustin
Country of Residence:: Canada
Street of Mailing Address:: 3037, Du Verger
City of Mailing Address:: St-Augustin
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G3A 2W8

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Marc
Family Name:: BOUCHARD
City of Residence:: Sainte-Foy
Country of Residence:: Canada
Street of Mailing Address:: 3230, Beaurepaire
City of Mailing Address:: Sainte-Foy
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G1X 1H4

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Eve
Family Name:: LANGELIER
City of Residence:: St-Etienne-de-Lauzon
Country of Residence:: Canada
Street of Mailing Address:: 35, Beausejour
City of Mailing Address:: St-Etienne-de-Lauzon
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G6J 1C4

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Daniel
Family Name:: DUPUIS
City of Residence:: Sainte-Foy
Country of Residence:: Canada
Street of Mailing Address:: 1569, rue du Tertre
City of Mailing Address:: Sainte-Foy
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G1W 4N7

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Canada
Status::	FULL CAPACITY
Given Name::	Stephanie
Family Name::	BOUCHARD
City of Residence::	Hull
Country of Residence::	Canada
Street of Mailing Address::	20, La Varendrye, apt. 403
City of Mailing Address::	Hull
State or Province of Mailing Address::	Quebec
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	J8Z 1R2
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Canada
Status::	FULL CAPACITY
Given Name::	Nazrul
Family Name::	ISLAM
City of Residence::	Sainte-Foy
Country of Residence::	Canada
Street of Mailing Address::	825, ave. Beauregard, apt. 110
City of Mailing Address::	Sainte-Foy
State or Province of Mailing Address::	Quebec
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	G1V 4L7
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Canada
Status::	FULL CAPACITY
Given Name::	Louis-Mathieu
Family Name::	STEVENS
City of Residence::	Montreal
Country of Residence::	Canada
Street of Mailing Address::	5863 Desavlniers
City of Mailing Address::	Montreal
State or Province of Mailing Address::	Quebec
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	H1N 3P9

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Canada
Status::	FULL CAPACITY
Given Name::	Sheila
Family Name::	LAVERTY
City of Residence::	St-Charles-sur-Richelieu
Country of Residence::	Canada
Street of Mailing Address::	1857, Grand Rang
City of Mailing Address::	St-Charles-sur-Richelieu
State or Province of Mailing Address::	Quebec
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	J0H 2G0
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Canada
Status::	FULL CAPACITY
Given Name::	Bertrand
Family Name::	LUSSIER
City of Residence::	St-Hyacinthe
Country of Residence::	Canada
Street of Mailing Address::	2722, rue Girouard Ouest, apt. 2
City of Mailing Address::	St-Hyacinthe
State or Province of Mailing Address::	Quebec
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	J2S 3B5
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Canada
Status::	FULL CAPACITY
Given Name::	Anne-Marie
Family Name::	BELZIL
City of Residence::	Outremont
Country of Residence::	Canada
Street of Mailing Address::	68, Courcelette
City of Mailing Address::	Outremont
State or Province of Mailing Address::	Quebec
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	H2V 3A6

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada
Status:: FULL CAPACITY
Given Name:: Pierrot
Family Name:: TREMBLAY
City of Residence:: Chicoutimi
Country of Residence:: Canada
Street of Mailing Address:: 25, De la Victoire
City of Mailing Address:: Chicoutimi
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G7G 2X3

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/990/320	11/23/01

ASSIGNMENT INFORMATION

Assignee Name:: UNIVERSITE LAVAL
Street of Mailing Address:: Saint-Foy
City of Mailing Address:: Quebec
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: G1K7P4